

FIG. 1

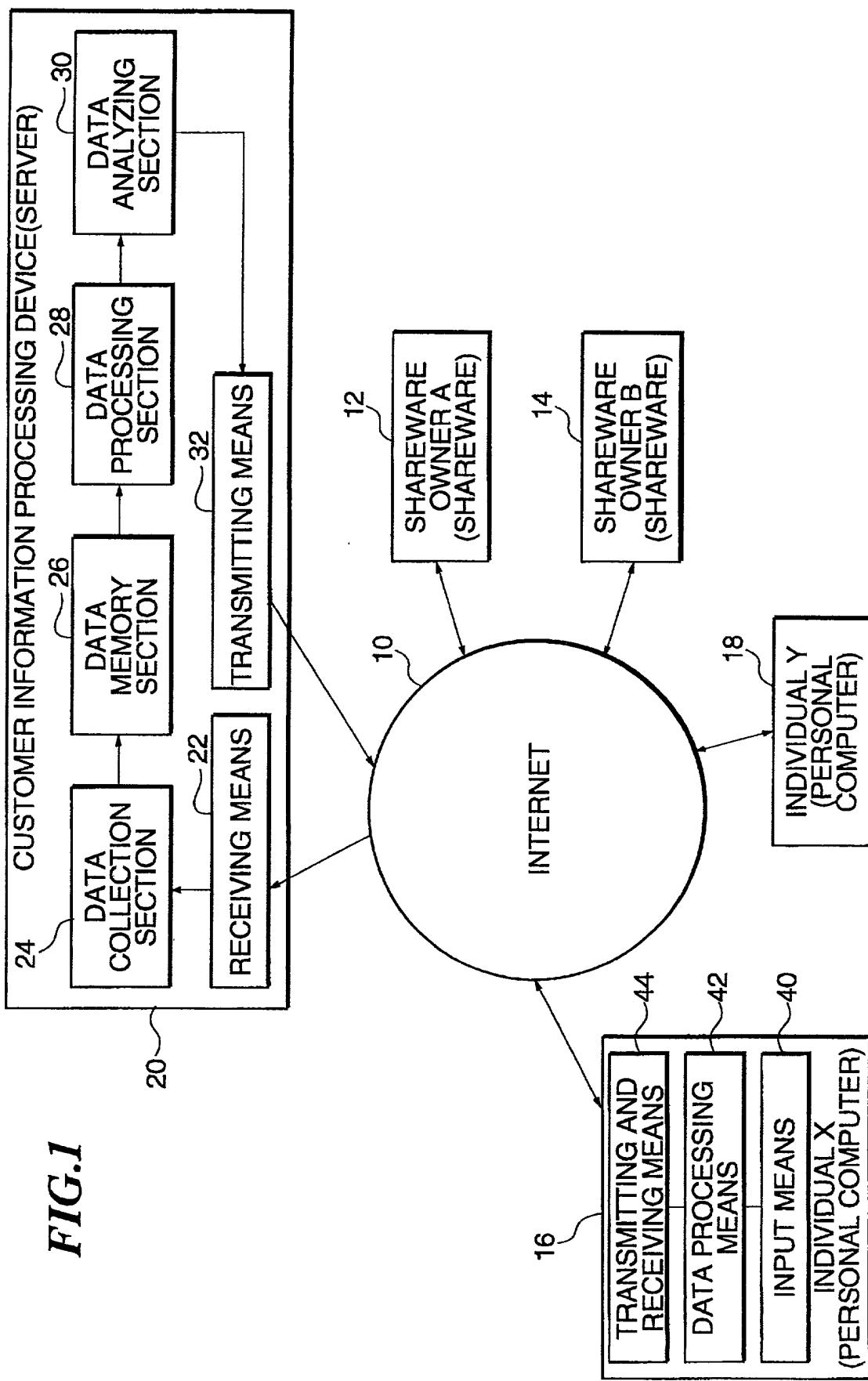
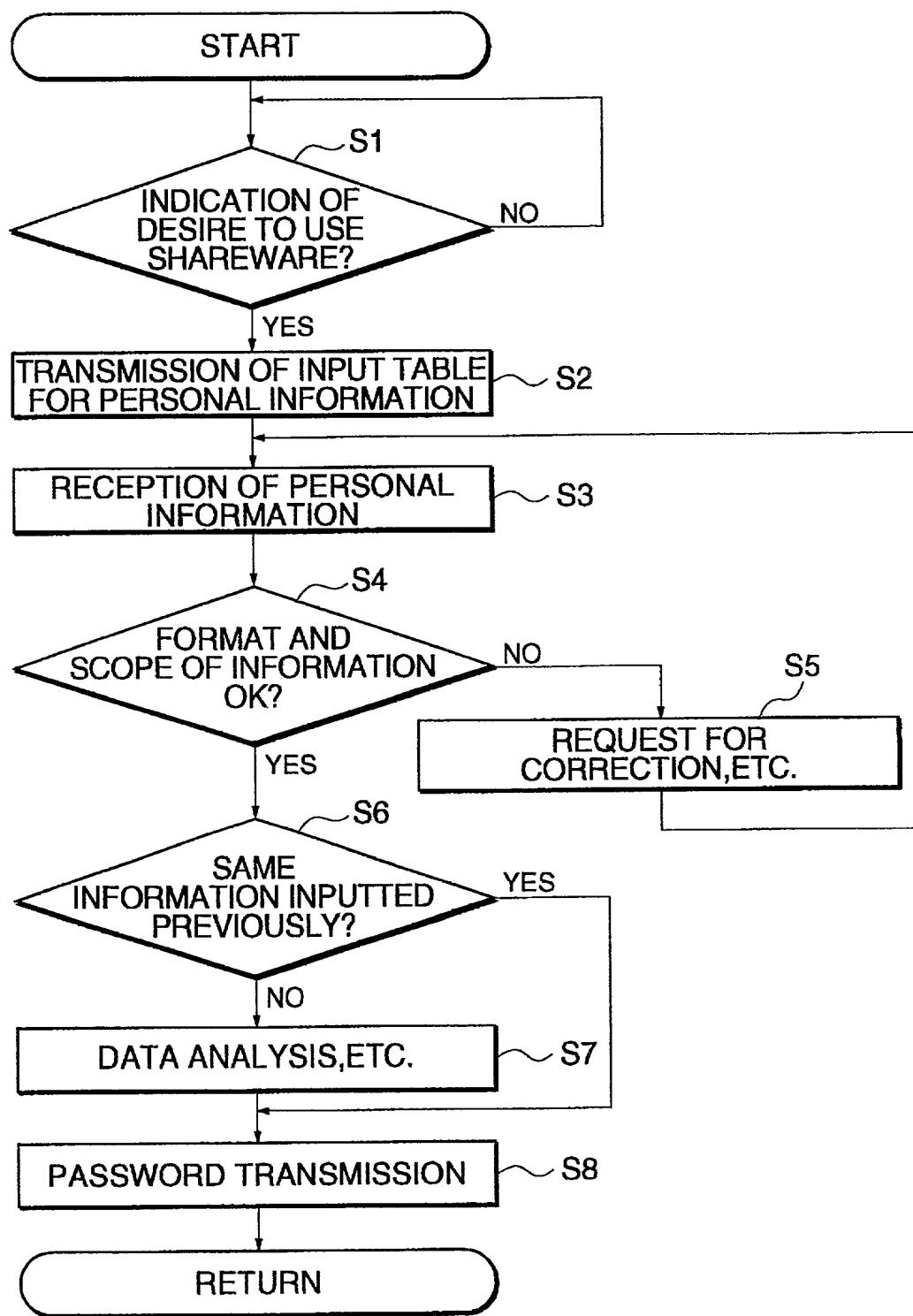


FIG.2



**FIG.3**

<b>FILL OUT AND SUBMIT THE FORM BELOW TO RECEIVE PASSWORD</b>	
CONTROL NUMBER	*****
NAME	*** **
NAME IN PHONETIC	** * ***
AGE	30      YEARS OLD
GENDER	MALE
ADDRESS	ZIP CODE *-* *
TELEPHONE NUMBER	<input type="radio"/> <input type="checkbox"/> *-* *
OCCUPATION	*****
E-MAIL ADDRESS	***** @ *****.*****